

Revision: HCFA-PM-91- 4 (BPD)
AUGUST 1991

Supplement 1 to ATTACHMENT 4.19-B
Page 1
OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Louisiana

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

Except for a nominal recipient copayment (as specified in Attachment 4.18 of this State plan), if applicable, the Medicaid agency uses the following general method for payment:

1. Payments are limited to State plan rates and payment methodologies for the groups and payments listed below and designated with the letters "SP".

For specific Medicare services which are not otherwise covered by this State plan, the Medicaid agency uses Medicare payment rates unless a special rate or method is set out on Page 3 in item ___ of this attachment (see 3. below).

2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, and designated with the letters "MR."
3. Payments are up to the amount of a special rate, or according to a special method, described on Page 3 in item ___ of this attachment, for those groups and payments listed below and designated with the letters "NR".
4. Any exceptions to the general methods used for a particular group or payment are specified on Page 3 in item 2 of this attachment (see 3. above).

STATE <u>Louisiana</u>	A
DATE RECD <u>7-27-99</u>	
DATE APP <u>9-22-99</u>	
DATE CH <u>7-1-99</u>	
HCFA 179 <u>99-11</u>	

TN No. 99-11
Supersedes 91-25 Approval Date 9-22-99 Effective Date 7-1-99

HCFA ID: 7982E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: LOUISIANA

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

QMBs: Part A SP Deductibles SP Coinsurance

Part B SP Deductibles SP Coinsurance

Other Part A SP Deductibles SP Coinsurance

Medicaid

Beneficiaries Part B SP Deductibles SP Coinsurance

Dual Part A SP Deductibles SP Coinsurance

Eligible

(QMB Plus) Part B SP Deductibles SP Coinsurance

MBs: Part A MR Deductibles MR Coinsurance - Title XVIII only services, Outpatient
Part B MR Deductibles MR Coinsurance Hospital services, Durable Medical
Equipment (DME), Professional
Services as described in Attachment 3.1
A Items 5 and 6, and Portable X-Ray
services.

Other Part A MR Deductibles MR Coinsurance - Outpatient Hospital services,
Medicaid Part B MR Deductibles MR Coinsurance Durable Medical Equipment (DME),
Beneficiaries Professional services as described in
Attachment 3.1 A Items 5 and 6, and
Portable X-Ray services.

Dual Part A MR Deductibles MR Coinsurance - Title XVIII only services,
Eligible Part B MR Deductibles MR Coinsurance Outpatient hospital services,
(QMB Plus) Durable Medical Equipment (DME),
Professional Services as described in
Attachment 3.1 A Items 5 and 6, and
Portable X-Ray services.

STATE <u>Louisiana</u>	A
DATE REC'D <u>7-27-99</u>	
DATE APP'D <u>9-22-99</u>	
DATE EFF <u>7-1-99</u>	
HCFA 179 <u>99-11</u>	

N# 99-11 Approval Date 9-22-99 Effective Date 7-1-99

Supersedes

TN# 97-12

Revision: HCFA-PM-91-4
AUGUST 1991

(BPD)

Supplement 1 to ATTACHMENT 4.19-B
Page 3
OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Louisiana

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

1. The Medicaid Program pays full co-insurance and deductibles on Medicare Part B pharmacy claims.
2. The Medicaid Program pays full co-insurance and deductibles on Medicare Part A inpatient hospital claims for services provided in small rural hospitals. A small rural hospital is a licensed hospital with sixty (60) beds or less located in a service municipality with a population of 20,000 or less.

STATE	<u>Louisiana</u>	A
DATE Rec -	<u>7-27-99</u>	
DATE Apprd	<u>9-22-99</u>	
DATE Eff -	<u>7-1-99</u>	
HCFA 179	<u>99-11</u>	

TN No. 99-11

Supersedes

TN No. 95-55

Approval Date 9-22-99

Effective Date 7-1-99

HCFA ID: 7982E